ATTORNEYS & COUNSELORS

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There are 3 different applications to charge the correspondence Address! 1) 09/435,657 (Pending) 2) 08/785,413 (Issued) 3) 08/607,964 (Issued)

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PTO/SB/81 (06-03)

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	Filing Date			11/08/	1999	
POWER OF ATTORNEY	Filing Date First Name		tor	John T	omic	
and	Art Unit	d ilivoi.	-			
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INDICATION	Attorney D		lumber	10851	3.000	11
	Attorney	OUNCL				
I hereby appoint:						
Practitioners at Customer Number						
OR						
Practitioner(s) named below: Name			Registr	ation Nu	mber	
Robert C. Klinger		1-		34,365		
Raffi J. Gostanian, J	<u> </u>	+		42,595		
Michael G. Carnero		+-		50,298		
		+-		43,130		
Bobby D. Slaton						
as my/our attorney(s) or agent(s) to prosecute	the application	identified	above, and	I to trans	act all	business in the Patent and
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Country USA						
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i am the: Applicant/inventor. Assignee of record of the entire interest Certificate under 37 CFR 3.73(b) is encir	osed. (Form PT	O/SB/96				
SIGNA	TURE of Applic	ant or A	ssignee of	Record		
Name John Tomich	<u> </u>	2				
Signature John VO2	mak)				
D/0 / 10/10 X 20	03-		Telepho		970	7-393-4729
NOTE Signatures of all the inventors or as	signees of reco	ord of the	e entire inte	erest or	their re	epresentative(s) are required.
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2003

PTO/SB/123 (05-03)

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Patent Number	5,778,116		
Issue Date	7/7/1998		
	08/785,413		
	01/23/97		
	John Tomich		
	Patent Number Issue Date Application Number Filing Date First Named Inventor		

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III the following holds applied to 1/2/	
PATENT NUMBER (if known)	APPLICATION NUMBER
5,778,116	08/785,413
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Completed by (check one)	Signature
Attorney or Agent of record	John Tomich
(Reg. No.)	Typed or Printed Name
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	972-393-4729 Requester's telephone number
Assignee recorded at Reel Frame	/0/17/2003 Date
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Utual dia 7 aponta	Patent Number	5,983,068
CHANGE OF CORRESPONDENCE ADDRESS Patent	Issue Date	11/9/99
	Application Number	08/607,964
Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Filing Date	02/29/96
	First Named Inventor	John Tomich
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Typed or Printed Name Signature	John Tomion	neu		5	720	202 1/20
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NOTE: Signa	tures of all the inventors or assignees of recors if more than one signature is required, see b	rd of the selow*.	entire	interest or their repre	sentative	s(s) are required. Outstruc

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108513,10



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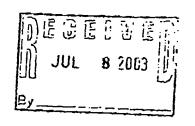
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ITEM	PATENT NUMBER	FEE CDE	fee amt	SUR CHARGE	Application number	PATENT DATE	FILE DATE	PAY YR	SML ENT	STAT
NBR 1	5,983,068	255]	445	0	08/607,964	11/09/99	02/29/96	04	YES	PAID

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PATENT NUMBER (if known)	APPLICATION NUMBER 08/785,413
5,778,116	
Completed by (check one) Applicant/Inventor	Signature
Attorney or Agent of record (Reg. No.)	Typed or Printed Name
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Requester's telephone number
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